

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO
10/5944449

FILING DATE
03 JUN 2007

APPLICANT(S)

9-26-01 CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/	
2	/		/		/	
3	2		1		2	
4	0		3		2	
5	0		3		2	
6			1		1	
7			3		1	
8			3		1	
9					1	
10					1	
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TOTAL IND.	1	↓	1	↓	1	↓
TOTAL DEP.	5	←	19	←	15	←
TOTAL CLAIMS	6		20		16	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.				↓		
TOTAL DEP.				↓		
TOTAL CLAIMS				↓		

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